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APPLICANTS

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av ** CONTINUING DATA *****

av ** FOREIGN APPLICATIONS *****

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>aw/stb</i>	STATE OR COUNTRY GERMANY	SHEETS DRAWING 0	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature	Initials			

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TITLE

Airbag cover

FILING FEE RECEIVED 1280	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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